

**STATEMENT OF ECONOMIC INTERESTS**

Date Received  
Official Use Only

**COVER PAGE**

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FPPC  
CITY OF LOMITA  
2011 MAR 08 PM 12:24

Please type or print in ink.

NAME OF FILER (LAST) (FIRST) (MIDDLE)

ESTRADA

MARGARET

11 MAR -ANA  
MID 42

**1. Office, Agency, or Court**

Agency Name

CITY of LOMITA

COUNCIL member

Division, Board, Department, District, if applicable

Your Position

If filing for multiple positions, list below or on an attachment.

Lomita Housing Authority Community Dev.  
Agency: Adj. to City Council  
Authority of Lomita Housing Commission

Position: Council member

**2. Jurisdiction of Office (Check at least one box)**

☐ State

☐ Judge (Statewide Jurisdiction)

☐ Multi-County

☐ County of

☒ City of Lomita

☐ Other

**3. Type of Statement (Check at least one box)**

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.

☐ Leaving Office: Date Left \_\_\_\_/\_\_\_\_/\_\_\_\_  
(Check one)

The period covered is 1/1/10, through December 31, 2010.

☐ The period covered is January 1, 2010, through the date of leaving office.

☐ Assuming Office: Date \_\_\_\_/\_\_\_\_/\_\_\_\_

☐ The period covered is \_\_\_\_/\_\_\_\_/\_\_\_\_, through the date of leaving office.

☐ Candidate: Election Year \_\_\_\_ Office sought, if different than Part 1: \_\_\_\_

**4. Schedule Summary**

Check applicable schedules or "None."

► Total number of pages including this cover page: 3

☒ Schedule A-1 - Investments - schedule attached

☒ Schedule C - Income, Loans, & Business Positions - schedule attached

☐ Schedule A-2 - Investments - schedule attached

☐ Schedule D - Income - Gifts - schedule attached

☐ Schedule B - Real Property - schedule attached

☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is

I certify under penalty of perjury under the laws of the State of California that

Date Signed March 7, 2011  
(month, day, year)

Signature

# SCHEDULE A-1

## Investments

### Stocks, Bonds, and Other Interests

(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

CALIFORNIA FORM **700**

FAIR POLITICAL PRACTICES COMMISSION

Name

*Margaret Estrada*

NAME OF BUSINESS ENTITY  
AT&T

GENERAL DESCRIPTION OF BUSINESS ACTIVITY  
100 HALF DAY RD.  
LINCOLN SHIRE, ILL 600691474

FAIR MARKET VALUE  
☐ \$2,000 - \$10,000    ☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000    ☐ Over \$1,000,000

NATURE OF INVESTMENT  
☒ Stock    ☐ Other \_\_\_\_\_ (Describe)  
☐ Partnership    ☐ Income Received of \$0 - \$499  
                                  ☐ Income Received of \$500 or More (Report on Schedule C)

IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

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GENERAL DESCRIPTION OF BUSINESS ACTIVITY

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 \_\_\_\_\_ / \_\_\_\_\_ / 10    \_\_\_\_\_ / \_\_\_\_\_ / 10  
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IF APPLICABLE, LIST DATE:  
 \_\_\_\_\_ / \_\_\_\_\_ / 10    \_\_\_\_\_ / \_\_\_\_\_ / 10  
 ACQUIRED                      DISPOSED

Comments: \_\_\_\_\_

**SCHEDULE C**  
**Income, Loans, & Business**  
**Positions**  
(Other than Gifts and Travel Payments)

<b>CALIFORNIA FORM 700</b> FAIR POLITICAL PRACTICES COMMISSION
Name <u>Margaret Escalante</u>

► 1. INCOME RECEIVED

NAME OF SOURCE OF INCOME  
AT&T

ADDRESS (Business Address Acceptable)  
100 HALF DAY RD P.O. BOX 474  
LINCOLN SHIRE, ILL 60069-1474

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
COMMUNICATIONS

YOUR BUSINESS POSITION  
Retired MGR. AT&T

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000

CONSIDERATION FOR WHICH INCOME WAS RECEIVED

☒ Salary    ☐ Spouse's or registered domestic partner's income

☐ Loan repayment    ☐ Partnership

☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or    ☐ Rental Income, list each source of \$10,000 or more

☒ Other Retired Pension  
(Describe)

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NAME OF SOURCE OF INCOME  
AT&T

ADDRESS (Business Address Acceptable)  
100 HALF DAY RD P.O. BOX 474  
LINCOLN SHIRE, ILL 60069-1474

BUSINESS ACTIVITY, IF ANY, OF SOURCE  
Communications

YOUR BUSINESS POSITION  
Retired MGR. AT&T

GROSS INCOME RECEIVED

<input type="checkbox"/> \$500 - \$1,000	<input type="checkbox"/> \$1,001 - \$10,000
<input checked="" type="checkbox"/> \$10,001 - \$100,000	<input type="checkbox"/> OVER \$100,000

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☐ Sale of \_\_\_\_\_  
(Property, car, boat, etc.)

☐ Commission or    ☐ Rental Income, list each source of \$10,000 or more

☐ Other Retired Pension  
(Describe)

► 2. LOANS RECEIVED OR OUTSTANDING DURING THE REPORTING PERIOD

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\* \_\_\_\_\_

ADDRESS (Business Address Acceptable) \_\_\_\_\_

BUSINESS ACTIVITY, IF ANY, OF LENDER \_\_\_\_\_

HIGHEST BALANCE DURING REPORTING PERIOD

<input type="checkbox"/> \$500 - \$1,000
<input type="checkbox"/> \$1,001 - \$10,000
<input type="checkbox"/> \$10,001 - \$100,000
<input type="checkbox"/> OVER \$100,000

INTEREST RATE \_\_\_\_\_ %    ☐ None

TERM (Months/Years) \_\_\_\_\_

SECURITY FOR LOAN

☐ None    ☐ Personal residence

☐ Real Property \_\_\_\_\_  
Street address \_\_\_\_\_  
City \_\_\_\_\_

☐ Guarantor \_\_\_\_\_

☐ Other \_\_\_\_\_  
(Describe)

Comments: \_\_\_\_\_